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ABSTRACT

The final report of the West Virginia Commission on Mental Retardation reports of the planning and implementation of programs for the mentally handicapped in the state. Described are specific accomplishments since the Commission was created in 1964 to help governmental agencies and civic groups in preparing programs. Progress in the following areas is detailed: legislation passed and proposed, public awareness and consulting services, prevention, education, residential care, rehabilitation, and recreation. Projects and proposals that have become reality in each of the nine state regions are summarized. (KW)

ED0 43145

PROMISE
IN
PROGRESS

WEST VIRGINIA COMMISSION
ON
MENTAL RETARDATION

2-6-50 0195

over 1000
children



COMMISSION ON MENTAL RETARDATION

1704 WASHINGTON STREET, E.
CHARLESTON, WEST VIRGINIA 25305

July 31, 1969

ED0 43145

Honorable Arch A. Moore, Jr.
Governor of West Virginia
State Capitol
Charleston, West Virginia 25305

Dear Governor Moore:

As a sequel to the state comprehensive plan on mental retardation, "A Plan Called Promise," released on April 27, 1966, we now have the pleasure of submitting to you "Promise in Progress." This publication attempts to tell you and the citizens of the State of West Virginia about the strides that have been made for the mentally retarded with the full awareness that much remains to be done in every area which deals with this problem.

This is the final progress report on the mental retardation planning and implementation program as required by the Department of Health, Education, and Welfare, Social and Rehabilitation Service, Rehabilitation Services Administration, Division of Mental Retardation. Planning and implementation efforts from the inception of the Commission on Mental Retardation on February 5, 1964, until December 31, 1968, were supported in part by a federal grant.

We hope that this will aid you and the citizens of this state in making a reality the continuing promise that the mentally retarded are worthy of our help.

Sincerely,

M. Mitchell-Bateman
M. Mitchell-Bateman, M. D., Chairman
Commission on Mental Retardation

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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ACKNOWLEDGEMENTS

We wish to thank Dr. Allen Blumberg, former planning coordinator to the Commission on Mental Retardation, for his assistance in preparing this progress report, "Promise in Progress," on the planning and implementation program.

Mrs. Barbara Blumberg planned and carried out the cover for this report, as she did the cover on the state comprehensive plan, "A Plan Called Promise," To Mrs. Blumberg we express appreciation also for her assistance.

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ON

MENTAL RETARDATION

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ON

**MENTAL RETARDATION
(to June 30, 1969)**

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Mrs. Howard Stallard	Williamson, W. Va.
Mrs. Cordelia V. Toles	Oak Hill, W. Va.

MENTAL HEALTH-MENTAL RETARDATION REGIONS

(as of June 30, 1969)

- + Established community mental health centers
- * Proposed community mental health centers
- *_* Proposed community health centers (site to be determined)
- # Established community mental retardation center
- ## Proposed community mental retardation centers

P E N N S Y L V A N I A

OUTLINE MAP STATE OF WEST VIRGINIA WITH COUNTY SEATS

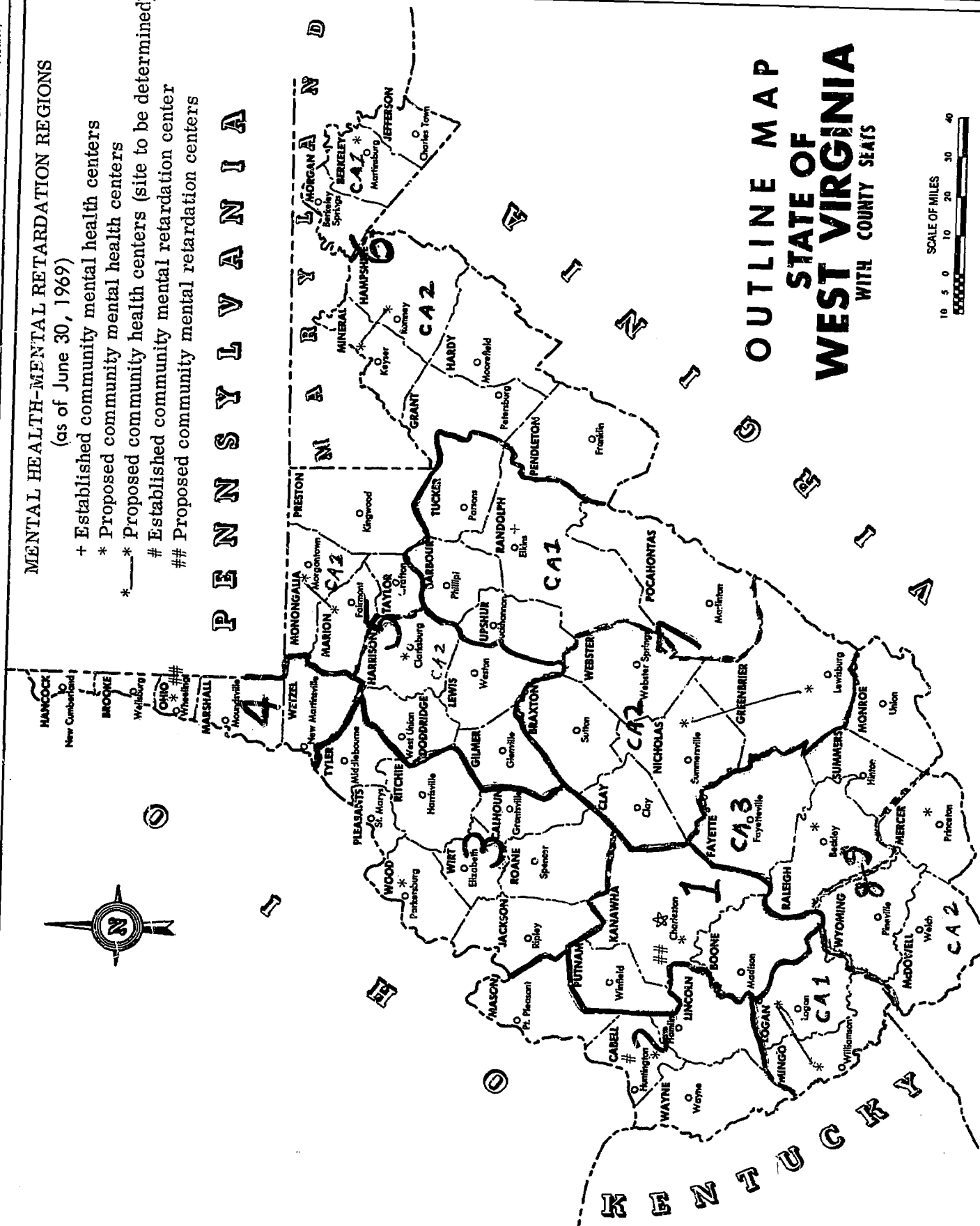


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PROMISE IN PROGRESS

Final Progress Report on Planning & Implementation Project

The West Virginia Commission on Mental Retardation was created by the West Virginia Legislature in 1964. This Commission was asked to carry out the following tasks: plan for and take other steps leading to comprehensive state and community action to combat mental retardation; determine what action is needed to combat mental retardation in the state and the resources available for this purpose; develop public awareness of the mental retardation problem and of the need for combating it; coordinate state and local activities relating to the various aspects of mental retardation and its prevention, treatment, or amelioration; consult with and advise the governor and legislature on all aspects of mental retardation; consult with and advise state agencies, boards or departments with mental retardation responsibilities relative to the effective discharge of such responsibilities.

The first project that the Commission undertook was to develop a comprehensive state plan. This plan, known as "A Plan Called Promise," was completed by April 1966. The plan served as a blueprint for helping governmental agencies and civic minded groups in preparing programs for the estimated 54,000 mentally retarded in the state.

One accomplishment that can be seen throughout the state is that our citizens are becoming aware of and give acceptance to the mentally retarded. No longer are these individuals viewed with the stigma of limitations. The new philosophy that prevails in this state is one that encourages opportunity for these individuals at every level of community living. This viewpoint has developed through a concerted public awareness

effort that stresses the abilities rather than the limitations of the mentally retarded. On the community level this attitude prevails for encouraging total involvement ranging from prevention and diagnosis to education and planning with total rehabilitation for many of the mentally retarded and protective living for some of these individuals.

Through this report we hope to show specific accomplishments that have become evident since the Commission on Mental Retardation came into existence.

It can record only what has been accomplished and attempt to emphasize what is needed. To some progress may appear too slow, the obstacles too frustrating--however, the firm belief in the conviction that the mentally retarded are individuals whose potential is unlimited offers us the strength to move forward.

This report is only a prelude for future planning. To fulfill the promise that the mentally retarded are ready to become acceptable citizens in this state is of paramount importance. Present and future comprehensive health planning must include the mentally retarded.

The development of services for the mentally retarded will always be an ongoing process. It will continue to call for the involvement of many people and many governmental agencies working cooperatively to prove that the mentally retarded can be helped to an acceptable place in society. The emphasis on a positive approach that must include creative undertaking and imaginative thinking is extremely vital.

PROGRESS

A. Legislation Passed

1. Testing for the detection of phenylketonuria made mandatory.

Passed February 7, 1966. (See Appendix A)

2. Education of exceptional children to be mandatory five years from passage.

Passed March 7, 1969. (See Appendix B)

3. Colin Anderson Center capitol improvements.

\$1,165,000 appropriated for capital outlay and improvements at the state institution for the mentally retarded. (Legislative appropriation, 1969 session)

4. Elimination of structural barriers in public buildings.

Passed March 8, 1969. (See Appendix C)

B. Legislation Proposed

1. Guardianship bill
2. Central Registry File.

C. Innovative Accomplishments

1. Regional Citizens Committees

Members of these committees have shown the leadership in providing services, facilities and programs for the mentally retarded on the regional level. A key accomplishment through the efforts of several of these regional committees has been the development of regional residential centers for the mentally retarded.

2. Regional Residential Centers

Several regional residential facilities have been approved for the mentally retarded in this state. These regional residential centers will serve as facilities that provide protective services for various degrees of mentally retarded individuals within their own home regions.

3. Institutional Personnel

A supervisor of special education and adjunctive therapies has been appointed to Colin Anderson Center. This supervisor is in charge of initial development and coordination of education and auxiliary services for the mentally retarded at this institution.

4. Community Program Specialist

The Commission on Mental Retardation has appointed a Community Program Specialist to consult with governmental agencies and civic minded groups in preparing proposals and initiating programs for the mentally retarded.

5. Education

The State Division of Special Education in the State Department of Education has taken advantage of the Elementary-Secondary Act to provide leadership for developing education programs in special education. This has proven to be valuable particularly through the development of special education specialists at various Pace Centers in our state.

D. Accomplishments of the Commission

1. Public awareness

- a. The Commission has continued to carry out its obligation as the fixed point of referral for the dissemination of news throughout the state concerning federal, state and community programs and services for the mentally retarded through resumption of the newsletter, Promise MR. This publication has a mailing list of 1,400.
- b. "Directory 1967" is being up-dated in order to serve as the key source for helping people to find what is available, and where, in regard to

services and facilities for the mentally retarded in our state.

"Directory 1969" was distributed in April 1969.

- c. "Journal on the Handicapped Child" has continued to be a public awareness project of the Commission on Mental Retardation. The fifth issue of this periodical is now being distributed. The "Journal" provides professional people in the field of mental retardation an opportunity to exchange ideas concerning their work with the mentally retarded as well as other handicapped children.
- d. Exhibit case in the Capitol rotunda continues to be a valuable means of showing the public what the activities and needs of the mentally retarded are throughout the state.
- e. Commission office is functioning as a fixed point of referral in providing speakers, printed materials and information to groups and individuals interested in mental retardation. Considerable effort is expended by the staff in coordinating these important areas of public awareness. Inquiries range from requests of the President's Committee on Mental Retardation to those of civic organizations, to the high school students' requests for term paper materials.
- f. A significant development in this category was "A Statewide Program of Public Awareness for the Mentally Retarded," carried out to mobilize the Women's Clubs of West Virginia in a movement to help the mentally retarded. Members of the Commission staff cooperated in this project in many ways.

The West Virginia Federation of Women's Clubs, numbering approximately 185 clubs with a membership of some 16,000 women, resolved at its annual convention in March 1963, to actively promote an expanded comprehensive program for the mentally retarded throughout the state.

Largely through the initiative of the Federation's mental retardation division chairman, Mrs. John McNeil, Jr., of St. Albans, their effort was supported in part by a mental retardation project grant from the United States Department of Health, Education, and Welfare.

Specific objectives of this project were to create more public awareness at the grass roots level and to support the efforts of the Governor's Commission on Mental Retardation to develop a comprehensive program for the mentally retarded in West Virginia.

From November of 1966 to May of 1967, nine seminars were held throughout the state, two in the Southern club district at Ronceverte and Welch, and one in each of the other districts at the following locations: Moorefield, Moundsville, Charleston, Parkersburg, Weston, Shinnston and Logan. A report on the project "Understanding is a Beginning," was released by Mrs. McNeil, project director, in August 1967.

Commission staff members served as consultants, speakers, and provided hundreds of copies of "A Plan Called Promise," the state comprehensive plan on mental retardation, as well as other materials for distribution.

2. Consultancy

Although drastically reduced in its professional capability with the

leaving of Dr. Allen Blumberg, planning coordinator, in June of 1968, the limited staff has continued in its consultancy role during the year.

In addition to its work with the regional citizens committees, the staff of the Commission has served as consultants for planning and implementation of programs and projects pertaining to mental retardation.

Some of the major projects in which the Commission staff have been involved are as follows: Governor's Comprehensive Health Planning Agency; Southern West Virginia Appalachian Regional Demonstration Health Project; Legislative Joint Committee on Government and Finance; Department of Mental Health Day Care; Foster Grandparents; subprofessional training programs; community mental health regional action meetings; Title VI Elementary-Secondary Education act review; Department of Employment Security in-service training program; Federal H. E. W. program-construction and staffing for community mental retardation facilities; physical education and recreation projects of Southern Regional Education Board and Joseph P. Kennedy, Jr. Foundation; West Virginia Association for Retarded Children growth in local membership campaign.

The staff of the Commission works continuously with members of regional citizens committees and local associations for retarded children to initiate and/or improve services for the mentally retarded on the community level.

In this regard, the staff has emphasized closer communications with all local associations for retarded children, essentially the parents' groups, to keep them fully aware of developments in mental retardation.

Mrs. Cook of the clerical staff, who is also a trained swimming instructor, headed up summer swimming programs for Kanawha Association for Retarded

Children. She also trained volunteers and instituted a swimming program for the mentally retarded in Mingo County.

3. Special Program Highlights

The Commission sponsored a "first in the nation" by promotion of "Physical Fitness MR. " On June 6, 1968, at Laidley Field in Charleston, 100 mentally retarded youngsters, boys and girls, from throughout the state in both the educable and trainable range participated in a series of seven physical fitness exercises with winners receiving trophies in all categories. All participants received certificates signed by Governor Smith and other state officials.

Then it was "on to Chicago" in July for four of these youngsters, two from Colin Anderson Center and one each from Huntington and Vienna. Three from Philippi joined the group in Chicago. These seven youngsters participated in the Chicago Special Olympics at Soldiers Field, sponsored by the Kennedy Foundation. West Virginia's contingent did well for itself, returning to "The Mountain State" with medals and trophies.

Special seminar was sponsored by the Commission at Wheeling in 1968 for the five county northern panhandle area. State officials participated with special emphasis on the Roney's Point program plans. Local panel participants discussed programs now in operation and those needed for service growth to the region's mentally retarded.

Later, at Elkins, the Commission jointly sponsored a mental retardation seminar with the Randolph Association for the Retarded, Inc. , featuring Mrs. Barbara Blumberg of Faith Workshop in Charleston, as well as other state and local agency representatives, in a day-long program outlining services for the mentally retarded.

PREVENTION

Early prevention of retardation is the first step in meeting the problem of handling mental retardation.

The Department of Health has established two consultation and evaluation clinics for mentally retarded children in this state. One is located at the West Virginia University Medical Center in Morgantown and serves primarily the mentally retarded individuals in the northern part of the state. The second clinic is located in Kanawha County and serves the mentally retarded in the southern part of the state. These clinics have been an excellent source for obtaining comprehensive examinations and evaluations on cases of mental retardation.

At the clinic in Kanawha County, from the period of July 1, 1966, through June 30, 1968, a total of 320 mentally retarded individuals were given comprehensive examinations. In the same period of time the clinic at the West Virginia University Medical Center examined 503 mentally retarded individuals.

The Department of Health has attempted to increase the number of such examinations by means of developing satellite diagnostic teams in various counties throughout the state. The development of such diagnostic teams will help to get the comprehensive examinations closer to the community situation. Such approaches will help to alleviate the travelling distance and the use of unfamiliar surroundings for examining the mentally retarded.

Some of the patients who formerly had to travel to South Charleston for evaluation can now obtain these services through two locations nearer their homes. One of these locations is at Clay where services are offered to children of Clay and Braxton counties. The second location is at Glen Ferris, Fayette County, which offers services to children

in Fayette and Nicholas counties. Both of these clinics offer the services of a pediatrician, clinical psychologist, nutritionist and public health nurses. Laboratory work and speech evaluations are arranged. Evaluation of the mentally retarded is available, but other children needing medical care are also accepted. The Clay and Glen Ferris Clinics are equipped to treat the whole child.

Since the passage of the bill making mandatory the test for detection of phenylketonuria in newborn children, these clinics have played a vital role in finding and working with children who have such a deficiency.

The clinics can serve as an excellent means of making comprehensive examination. However, the need for more local help in follow-up services is needed. The tragedy becomes all too apparent when one considers that very often the mentally retarded are given the comprehensive mental and physical examination and there is no one to turn to for help in the retardate's community.

EDUCATION

The programs for educating the mentally retarded have shown tremendous growth in our state. During the school year 1964-65 there were 137 special education classes serving 1,982 mentally retarded children. During the school year 1968-69 there are now 306 special education classes educating 4,190 mentally retarded individuals.

It is worth noting that many of our counties are beginning to develop programs for the mentally retarded in their secondary schools. This has come about through the cooperative help of the Division of Vocational Rehabilitation and our county school systems.

During the past few years the State Department of Special Education has been instrumental in getting aid to special education teachers. One of the creative approaches

has been to assign a supervisor of special education in each of the Pace Centers in this state. The purpose for this supervisor is to act as a consultant for special education programs in the respective county school systems within his region. The supervisor can help the county to prepare proposals, get proper materials and supplies for educating the mentally retarded and aid respective county boards of education in finding funds for developing and expanding their special education programs.

During the 1969 session of the state legislature, the mandatory education bill for all exceptional children was passed. This bill requires all county school systems to have classes for exceptional children by the opening of the school term in the year 1974. (See Appendix B).

This bill will play a major role in seeing to it that the estimated 12,820 mentally retarded children who are within the school age range of six to twenty-one receive adequate educational programs. However, to be effective, it must be adequately funded each year by the legislature.

Our schools of higher learning are beginning to expand in the development of programs for training special education teachers.

West Virginia University, Kanawha Valley Graduate Center, and Marshall University are offering graduate programs to prepare special education teachers for the mentally retarded. West Virginia University and Marshall University also offer graduate extension programs throughout the state to help prepare teachers for this special field. Marshall University offers programs in training special education teachers on the undergraduate level.

In addition to these schools of higher learning such colleges as Glenville State College, West Virginia State College, West Liberty State College and Salem College,

have begun and are further developing, programs for training special education personnel to work with the mentally retarded on the undergraduate level.

It is also interesting to note that within the development of such programs schools of higher learning are beginning to cooperate in joint ventures that will allow cross-listing of special education courses--allowing the development of workshops and special education projects to be done in cooperative basis.

RESIDENTIAL CARE

The State Department of Mental Health has been providing community programs for the mentally retarded while continuing state institutional facilities and programs. These have been on a limited basis and subject to meager funds available.

This state agency has been responsible for the development of community day care centers for severely mentally retarded children. Day care centers emphasize self-care, socialization, maturation and self-expression. These particular early training programs fit into the philosophy of the city-oriented services for the mentally retarded. The Department of Mental Health has been vitally interested in working with community agencies and interested citizens in developing such residential projects as Green Acres, Roney's Point, and a residential center at Institute in Region I, to serve Kanawha, Putnam, and Boone counties. This state agency is working with the Department of Health in seeing that the mentally retarded will be provided with services in the forthcoming Southern Appalachian Health Project. This project will help to bring health, education and rehabilitation programs to the mentally retarded in the heart of the Appalachian area.

The education and recreational program at the Colin Anderson Center, institution

for the mentally retarded, has been improved greatly by the recruitment of an individual to fill the position of supervisor of education and adjunctive therapies. Expanded recreational and day camp programs, as well as a program for preschool aged children, have greatly enhanced the offerings programwise of Colin Anderson Center. It has achieved considerable progress under the direction of Eladio E. Mazon, M.D., superintendent.

The legislature, in its 1969 session, appropriated \$1,165,000 to the Colin Anderson Center in an attempt to make improvements and to alleviate the overcrowded conditions and to modernize this facility. It has been characterized by a long waiting list in nearly all categories of mentally retarded. However, a large institution has not been the goal of mental retardation planners, but rather the development of community programs for all those able to participate. The institution would be for the profoundly retarded group not able to participate and unable to stay in the home environment.

The foster grandparent program at the Colin Anderson Center and the Charleston Day Care Center have proven invaluable in bringing close maternal and paternal affection to many mentally retarded children who have never known such relationships. To other mentally retarded children the foster grandparents have offered the necessary individual help that is needed to teach these individuals such tasks as feeding, dressing, verbalizing and socializing.

The State Department of Mental Health has been interested in seeing that programs and services are developed for the mentally retarded so that they can reach their full capacity and potential.

REHABILITATED

The Division of Vocational Rehabilitation has for years taken the lead in developing programs to bring the mentally retarded into the community as acceptable individuals. This state agency no longer considers its work with the mentally retarded adults as a one agency function.

In recent years the Division of Vocational Rehabilitation has worked cooperatively with county boards of education in Cabell, Ohio and Mercer counties to develop secondary educational programs that are geared to meet the needs of the adult mentally retarded. These secondary academic programs, operated in close harmony with special education personnel and rehabilitation counselors, emphasize limited academic skills, community living, and preparation for employment.

For the mentally retarded adult who cannot get significant help from these particular educational programs the Division of Vocational Rehabilitation offers help in evaluation and training of these individuals in sheltered workshops. Many of the mentally retarded who are properly evaluated and trained in the environment of sheltered workshops have been able to find employment that offers them some financial remuneration within these protective surroundings. However, the philosophy of ultimate employment for DVR clients emphasizes the need for expanded activity center services for those retarded whose employment potential is found to be restricted. Further development of this type of program for the adult retardate is an acute need.

The Rehabilitation Center at Institute, West Virginia, has provided model programs in evaluation, training and counseling for the mentally retarded. Project 957 for mentally retarded young women achieved national prominence in professional journals not long ago.

The reward for attempting to rehabilitate the mentally retarded in this state has proven to have some merit when one considers the number of cases of mentally retarded adults who have been rehabilitated; for example, in 1958 only 57 mentally retarded adults were considered capable of returning to the community by this state agency. However, in 1968 the number of mentally retarded rehabilitated rose to 321 cases. (See Appendix D).

Each case of a mentally retarded adult who is rehabilitated shows the value of cooperative planning. Early detection, early education, early parental guidance and follow-up through rehabilitation training programs brings another mentally retarded adult into the community fully prepared and trained to take his place as a citizen of whom we can all be proud.

RECREATION

Workshops on Physical Arts with the Mentally Retarded

1. Music: Dr. Richard Weber of Trenton, N. J., conducted two workshops in different sections of the state to help teachers, aides and volunteers on the "Musical" method of teaching the retarded through music.
2. Arts & Crafts: Mrs. Barbara Blumberg conducted sessions in separate areas of the state for the same groups concerning the teaching of trainables in the fundamentals of creativity with arts and crafts for the mentally retarded.
3. Mr. William Muhl of Rockford, Illinois, took part in these workshops, showing methods for teaching swimming and water safety with the mentally retarded.

Track Meet

A statewide track meet covering the seven physical fitness exercises recommended by the American Association for Health, Physical Education and Recreation, and the

Joseph P. Kennedy, Jr. Foundation, was sponsored by the Commission. Participants were from special education classes, sheltered workshops, day care centers and the state institution for the mentally retarded. Four winners were sent to the Chicago Special Olympics.

Camp Apache

A summer camp, sponsored by the state Association for Retarded Children, is promoted through the Commission. Camperships are provided by various civic groups throughout the state. Activities included are swimming, archery, hiking, nature study, shuffle board, and crafts.

Swimming Program

Personnel of the Commission on Mental Retardation have set up the mechanics of swimming programs and have trained volunteers in proper methods of working with the mentally retarded in Kanawha County and in the southern part of the state during the summer months. Programs in some of the northern areas have been conducted at indoor pools and continue the year round. (One of our swimmers placed third in swimming competition at Chicago Special Olympics).

Christmas Party

Each Christmas a local department store in the Charleston area invites all retarded children to a party. Professional entertainment is provided; Santa Claus appears and distributes gifts. This project is repeated in other sections of the state.

REGIONS

Many of the projects and proposals that have become reality in various regions of the state were initiated by members of the Advisory Committee of the Commission

on Mental Retardation and members of the Regional Citizens Committees.

REGION I-- Counties of Boone, Kanawha, Putnam
Chairman - Mrs. Frank Butts

Construction funds of nearly \$305,000 were approved in the year 1968 for Region I initial facility, a day care center, scheduled to serve 60 mentally retarded youngsters in the three county area. Federal funds comprise a large portion of the construction cost. Other phases of the comprehensive program will follow.

Union Carbide Corporation donated 20 acres of prime real estate at Institute to the Kanawha County Court, who in turn deeded the land to the Department of Mental Health. They are the legal applicant of record although the facility will be operated by the regional group through its appropriate board.

Architectural drawings are now being finalized, subject to the letting of bids for construction. Mrs. Frank Butts, regional chairman, is hopeful that actual construction work will get under way during 1969.

Mental retardation task force of Community Mental Health meeting, attracted many Regional Citizens Committee members to discuss achievements and needs of the three county region. Mrs. Butts served as mental retardation leader. Significant new services for the trainable mentally retarded are noted in Kanawha County with the addition of four classes making a total of six--all provided by county funds.

REGION II -- Counties of Cabell, Wayne, Mason, Lincoln
Chairman - Mrs. Sadie McGhee

Construction is now under way at Green Acres Regional Mental Retardation center. Administrator Richard A. Kelly reports that the components of the sewage treatment plant, along with residential cottage and administration building are proceeding at the center located at LeSage. A federal staffing grant has been applied for by the center.

Already operating in existing structures at Green Acres are the regional sheltered workshop and more recently the personal adjustment center. Efforts in personal adjustment involve evaluation for later sheltered workshop admission along with remedial programs and social development training.

Huntington Day Care Center, in operation about ten months now, has 16 mentally retarded children attending daily. Prognosis for growth appears imminent and the need for a larger facility has sparked a search for larger quarters. Day Care Center operation here, as well as at Point Pleasant, Mason County, is made possible by funding from West Virginia Department of Mental Health. Seven children are being served at Point Pleasant. Limited transportation services in this and other non-urban areas preclude certain children from participation in day care as well as in the very few special education classes for trainable mentally retarded operated by county boards of education.

Mr. David McGinnis of Commission Advisory Committee was leader of the mental retardation task force sub-group at meetings on Mental Health Community Services.

Regional mental health center facility to be used for diagnostic and evaluation service is well along in construction on Route 60 east of Huntington.

REGION III - Counties of Wood, Jackson, Roane, Calhoun, Wirt, Ritchie, Pleasants, Tyler
Chairman - Mr. J. J. DiNicola

The Department of Health, Education, and Welfare recently awarded a \$45,091 grant to the Colin Anderson Center at St. Marys to conduct a program of community transitional adjustment for the mentally retarded. The City of Parkersburg is expected to be the site of a half-way house and the focal point for extensive habilitation and rehabilitation efforts in this program.

Approval was recently granted on the state level to provide funds from the Depart-

ment of Mental Health to assist Region III citizens group in the establishment of a day care center for severely mentally retarded children in the area not able to attend special education classes for the trainable group. Provision of adequate day care funds by the legislature is required to carry forward this and other total programs so greatly needed throughout the state.

Wood County Sheltered Workshop was expanded previously to provide its services to retarded in the region who are able to commute or to obtain local proper living accommodations. This workshop continues to be a model program within the state and its program and facilities are observed by many interested groups and individuals.

Region III task force on mental retardation cooperated with the Mental Health Community Services group in discussing needs in the area.

REGION IV -- Counties of Brooke, Ohio, Hancock, Marshall, Wetzel
Chairman - Dr. Charles F. Young (died 10/5/68)

Bids are expected to be let in the near future for construction at Roney's Point near Wheeling for Region IV facility. Initial phase includes sheltered workshop and day care center for severely retarded in the five county area.

A psychological services center funded through the U.S. office of Education is now in operation. This project offers county school systems in the region the unique opportunity to consolidate information such as psychological, medical and educational data concerning all types of handicapped children.

Sheltered workshops continue in operation at Weirton and Wheeling with mentally retarded being the principal recipients of services. The Lincoln school special education-DVR program maintains a close relationship with Wheeling's Civitan sponsored workshop.

Local programs are sponsored by associations for retarded children in Ohio and

Marshall counties as privately operated trainable facilities.

Mental retardation task force was a key group in cooperating with Community Mental Health Services group.

REGION V - Counties of Moulton, Preston, Marion, Taylor, Harrison, Lewis, Gilmer
Chairman - Dr. Robert H. Neff

Grafton, Taylor County, has one of the newer sheltered workshops in West Virginia giving Region V its third such facility to go with workshops now operating at Clarksburg and Fairmont. The mentally retarded are the principal group of handicapped enrolled.

Regional Citizens Committee is renewing its efforts towards development of a sheltered workshop at Morgantown and university affiliated MR center in conjunction with West Virginia University.

Chairman Neff and Dr. Gere Klingberg, both members of the Commission Advisory Committee, were co-chairmen of an important meeting of the subcommittee on "The State of the Nation" of the President's Committee on Mental Retardation held at Mont Chateau on May 15-16. This group considered the important topic of "mental retardation and poverty;" made visits to homes of families affected by both mental retardation and poverty; and visited the WVU Medical Center.

Fairmont was the site of the Community Mental Health meeting which included a task force group on mental retardation to consider existing programs and needs of the seven county area.

Diagnostic and Evaluation Clinic for mentally retarded at WVU Medical Center continues to be an important service for, not only Region V, but the northern part of the state as well.

Special education programs were enlarged at Glenville State College and instituted

at Salem College. These programs will help to fulfill a need for training special education teachers at the undergraduate level.

REGION VI - Counties of Berkeley, Jefferson, Morgan, Hampshire, Mineral, Hardy and Pendleton

Chairman - Mrs. Mary Coughenour

Development of a sheltered workshop at Martinsburg for the handicapped, including the mentally retarded, was a highlight in recent accomplishments. Local programs have been developed in Jefferson county, "The School of Hope" at Middleway, for trainable youngsters; and in Mineral county, a developmental center to provide educational, corrective and counseling service to many different groups of handicapped youngsters and their families. The mentally retarded are one of the groups to be served.

Appalachian Mental Health Center, based at Elkins in adjoining Region VII, has been able to provide diagnostic and evaluation services on a limited basis to some counties in Region VI who have contracted with Appalachian for services.

Progress is being made for a regional mental health center to be located at Martinsburg which will be a focal point for increased services to the mentally retarded as well.

The mental retardation task force met at Martinsburg as a component of the community services mental health regional meeting.

REGION VII - Counties of Barbour, Tucker, Upshur, Randolph, Braxton, Webster, Pocahontas, Clay, Nicholas and Greenbrier

Chairman - Dr. Joyce LoBello

Appalachian Mental Health Center is providing psychological testing in most of the area counties.

Randolph Association for Retarded Children, Inc., became a member of the West Virginia Association for Retarded Children, Inc. This group joined with the Commission

on Mental Retardation to sponsor a mental retardation seminar at Elkins with persons from throughout the region in attendance.

Community mental health meetings with important task forces on mental retardation were held for two catchment areas of this geographically large Region VII area. Elkins was the location for Barbour, Pocahontas, Randolph and Tucker counties. At Summersville representatives from the counties of Braxton, Clay, Greenbrier, Nicholas and Webster attended.

Limited programs of day care with volunteer help have been reported in operation in Barbour, Randolph, Clay and Greenbrier counties.

REGION VIII - Counties of Fayette, Raleigh, Summers, Mercer, Monroe

Chairman - Mrs. Cordelia V. Toles

and

REGION IX - Counties of Logan, Mingo, McDowell, Wyoming

Chairman - Mrs. Howard Stallard

Significant development in this combined region is that funding was made to the Southern West Virginia Appalachian Demonstration Health project, including the mental health component. Funds are provided for several mental retardation day care center operations during phase one. Implementation in this area is getting underway and a mental retardation coordinator is scheduled to be on the combined regional staff. Many other services will be available to the mentally retarded who may have additional mental health, medical, para-medical and social type needs.

Local associations for retarded children which have affiliated with the state organization are those from Fayette, Mercer and McDowell counties. Hawk's Nest State Park, near Ansted, Fayette County, was the scene of the 1968 annual convention of the West Virginia Association for Retarded Children.

Beckley was the site for the community services mental health meeting for

combined Regions VIII and IX. The mental retardation task force was well attended by enthusiastic Regional Citizens Committee people from nearly all counties.

Special education programs have received considerable emphasis in these regions with Raleigh County setting the pace in Region VIII with 30 classes in action. (25 educable; 5 trainable). McDowell County is moving along in Region IX, as are Mercer and Logan Counties.

At Logan a local group has gotten a limited day care program underway pending the development of the Southern Appalachian program. Charleston Day Care Center will be the training site for staffs of the Southern Appalachian day care programs.

Mercer County sheltered workshop and Wade School special education-DVR program are model operations in this area.

This nine county area of southern West Virginia should see its programs well under way during 1969. It can be the pilot for development of many types of services for the retarded as well as all other handicapped individuals throughout the state and perhaps for semi-rural areas throughout the nation.

A P P E N D I X A

ENKOLLED

HOUSE BILL NO. 275

(By Mr. Holliday and Mrs. Withrow)

(Passed February 7, 1966; in effect ninety days from passage.)

AN ACT to amend and reenact section three, article twenty-two, chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, relating to the detection of phenylketonuria in newborn children.

Be it enacted by the Legislature of West Virginia:

That section three, article twenty-two, chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be amended and reenacted to read as follows:

Article 22. Detection and Control of Phenylketonuria in Newborn Children.

Section 3. Tests for Phenylketonuria; Reports; Assistance to Afflicted Children.--The physician attending a newborn child or any person attending a newborn child not under the care of a physician shall cause to be made a test for phenylketonuria approved by the state department of health. Any test found positive for phenylketonuria shall be promptly reported to the state department of health by the director of the laboratory performing such test.

The state department of health, in cooperation with other state departments and agencies, and with attending physicians, is authorized to provide medical, dietary and related assistance to children determined to be afflicted with phenylketonuria.

A P P E N D I X B

ENROLLED

SENATE BILL NO. 44

(By Mr. Jackson, Mr. President, and Mr. Carrigan)

(Passed March 7, 1969; in effect July 1, 1969.)

AN ACT to amend and reenact section one, article twenty, chapter eighteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, relating to establishment of special schools and teaching services for exceptional children.

Be it enacted by the Legislature of West Virginia:

That section one, article twenty, chapter eighteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be amended and reenact to read as follows:

Article 20. EDUCATION OF EXCEPTIONAL CHILDREN.

18-20-1. Establishment of special schools and teaching services for exceptional children.

1 In accordance with the following provisions, county
2 boards of education through the state having five
3 or more exceptional children of any one of the types
4 or classifications hereinafter provided for shall establish
5 and maintain special schools, classes, home-teaching or
6 visiting-teacher services for such type or classification
7 in order to provide for educating exceptional children
8 between the ages of six and twenty-one, but who differ
9 from the average or normal in physical, mental or emo-
10 tional characteristics, or in communicative or intellectual
11 deviation characteristics, or in both communicative and
12 intellectual deviation characteristics, to the extent that
13 they cannot be educated safely or profitably in the regu-
14 lar grades of the public schools, and for whom special
15 educational provisions need to be made in order to edu-
16 cate them in accordance with their capacities, limitations
17 and needs. In addition, county boards of education may
18 establish and maintain other educational services for
19 such types or classifications as the state superintendent
20 of free schools may approve.

APPENDIX B continued. Enr. S. B. 44)

21 The general types and classifications of exceptional
22 children for whom provision may be made under this
23 article are the following areas of exceptionality: Visu-
24 ally impaired, hearing impaired, physically or ortho-
25 pedically handicapped, epileptic, mentally retarded, speech
26 handicapped, multiple handicapped, autistic, intellectually
27 gifted, socially or emotionally maladjusted including the
28 delinquent, learning disabilities both physical and psy-
29 chological and any other areas of exceptionality which are
30 identified and approved by the state superintendent of
31 free schools.

32 By the school year beginning on the first day of July,
33 one thousand nine hundred seventy-four, county boards
34 of education shall establish and maintain these special
35 schools, classes, home-teaching and visiting-teacher serv-
36 ices. The state superintendent of free schools shall adopt
37 rules and regulations to advance and accomplish this
38 program.

39 Nothing in this section shall be construed to prevent
40 county boards of education from providing special schools,
41 classes, home-teaching or visiting teacher's services for
42 exceptional children between the ages of three and six.

A P P E N D I X C
ENROLLED
COMMITTEE SUBSTITUTE
FOR
HOUSE BILL NO. 676
(Originating in the Committee on the Judiciary)

(Passed March 8, 1969; in effect July 1, 1969.)

AN ACT to amend chapter eighteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, by adding thereto a new article, designated article ten-e, relating to requiring all public buildings and facilities constructed with public funds to be accessible to and usable by the physically handicapped; creating the state board of public buildings; authorizing rules and regulations; providing for enforcement by the director of the division of vocational rehabilitation and the state board of public buildings; authorizing judicial action; and providing a severability clause.

Be it enacted by the Legislature of West Virginia:

That chapter eighteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be amended by adding thereto a new article, designated article ten-e, to read as follows:

ARTICLE 10E. HANDICAPPED PERSONS AND PUBLIC BUILDINGS AND FACILITIES.

18-10E-1. Purpose.

1 It is hereby declared to be the public policy of this
2 state that all public buildings and facilities covered by
3 this article, as specified in section two of this article, be
4 accessible to and functional for the physically handi-
5 capped, without loss of function, space or facilities so
6 far as the general public is concerned.

18-10E-2. Application of article.

APPENDIX C continued. Enr. Com. Sub. for H.B. No. 676)

1 (a) The provisions of this article and the reasonable
 2 rules and regulations promulgated hereunder shall apply
 3 to all temporary, emergency or permanent buildings and
 4 facilities used by the public which are constructed after
 5 the effective date of this article in whole or in part by
 6 the use of state, county or municipal funds or the funds
 7 of any other political subdivision of this state, except
 8 as hereinafter provided.

9 (b) Notwithstanding the provisions of subsection (a)
 10 of this section, the provisions of this article and the
 11 reasonable rules and regulations promulgated hereunder
 12 shall also be applicable to all buildings and facilities
 13 used by the public and which are under construction
 14 on the effective date of this article by the use in whole
 15 or in part of state, county or municipal funds or the
 16 funds of any other political subdivision of this state,
 17 unless the governmental authorities responsible for the
 18 construction shall determine that the construction has
 19 reached a state where compliance is impractical.

18-10E-3. Rules and regulations.

1 In order to implement the provisions of this article,
 2 the director of the division of vocational rehabilitation
 3 of the state board of education, with the approval of the
 4 state board of public buildings hereinafter created, shall
 5 promulgate reasonable rules and regulations. The director
 6 and the board, in promulgating and approving such
 7 reasonable rules and regulations, shall take into account
 8 the following:

9 (1) Use of buildings and facilities by persons confined
 10 to wheelchairs, persons using crutches or other walking
 11 aids, persons afflicted by sight or hearing loss, persons
 12 disabled by age, and any other persons whose mobility
 13 is limited; and data shall be gathered to determine the
 14 needs of any such persons;

15 (2) Frequency of use by disabled persons as above
 16 enumerated; and

17 (3) Additional construction cost required to comply
 18 with the provisions of this article and such reasonable
 19 rules and regulations.

20 The director shall have the authority to except build-
 21 ings and facilities from the provisions of this article and
 22 such reasonable rules and regulations, in whole or in
 23 part, if, in his opinion, compliance therewith would
 24 create a financial hardship, be impractical or serve no
 25 benefit.

26 All such reasonable rules and regulations shall be
 27 promulgated in accordance with the provisions of article

APPENDIX C continued. Enr. Com. Sub. for H.B. No. 676

28 three, chapter twenty-nine-a of this code, and shall in-
29 clude, but not be limited to, provisions pertaining to the
30 following:

31 (1) Reservation of parking spaces for the disabled,
32 where possible;

33 (2) Construction of exterior walkways and ramps;

34 (3) Design and construction of doorways;

35 (4) Design and construction of interior floors, steps,
36 ramps, and doorways;

37 (5) Design of and accessibility to elevators;

38 (6) Design and construction of toilet facilities for use
39 by the disabled.

40 (7) Design and location of public telephones, water
41 fountains and other conveniences to facilitate their use
42 by the disabled; and

43 (8) Accessibility of at least one primary entrance to
44 individuals in wheelchairs.

18-10E-4. State board of public buildings; expenses.

1 There is hereby created the state board of public build-
2 ings which shall consist of five members appointed by the
3 governor, one member to be a representative of the state
4 building commission, one member to be a representative
5 of a municipality, one member to be a representative
6 of a county court, one member to be a representative
7 of the state board of education, and one member to be
8 an architect. Each member shall serve at the will and
9 pleasure of the governor. The members of the board
10 shall receive no compensation for their services on such
11 board, but they shall be reimbursed for all reasonable
12 and necessary expenses actually incurred in the perform-
13 ance of their duties as members of the board.

18-10E-5. Enforcement.

1 It shall be the duty of the director to enforce the
2 provisions of this article and all reasonable rules and
3 regulations promulgated hereunder, and it shall be the
4 duty of the state, any county, municipality or other
5 political subdivision thereof, or any department, agency,
6 commission, board or bureau thereof, responsible for the
7 construction of any public building or facility to comply
8 with the provisions of this article and all such reasonable
9 rules and regulations. Whenever the director ascertains
10 that any such public building or facility is about to be
11 constructed or is under construction (which construction
12 began after the effective date of this article) in violation
13 of the provisions of this article or any such reasonable

APPENDIX C continued. Enr. Com. Sub. for H.B. No. 676

14 rules and regulations, he may petition the circuit court
15 of the county wherein the construction is to be or is
16 taking place for an order to compel compliance with the
17 provisions of this article and such reasonable rules and
18 regulations, and the court may compel compliance unless
19 such court finds that compliance would create a financial
20 hardship, be impractical or serve no benefit.

18-10E-6. Severability.

1 If any provision of this article or the application thereof
2 to any person or circumstances is held unconstitutional
3 or invalid, such unconstitutionality or invalidity shall
4 not affect other provisions or applications of the article,
5 and to this and the provisions of this article are declared
6 to be severable.

TOTAL REHABILITATED AND MENTALLY RETARDED REHABILITATED - WITH PERCENTAGE
WEST VIRGINIA
1945 THROUGH 1968

WEST VIRGINIA (1)			
Year	Total Rehabilitated	Total Rehabilitated	%
1945	827	0	---
1946	773	0	---
1947	1305	1	---
1948	1546	4	---
1949	1556	6	---
1950	1722	6	---
1951	1801	8	0.4
1952	1780	8	0.4
1953	1655	16	1.0
1954	1545	8	0.5
1955	1605	20	1.2
1956	2078	36	1.7
1957	2171	38	1.7
1958	2332	57	2.1
1959	2665	35	1.1
1960	3023	71	2.3
1961	3490	105	3.3
1962	3710	111	2.7
1963	3799	137	3.6
1964	3875	156	4.0
1965	3913	172	4.4
1966	4028	250	6.2
1967	4319	306	7.1
1968	4794	<u>321</u>	6.7
		1872	

1. Reported from DVR Annual Reports